



Non-Profit Organization Funding Request

2026

Application Due Date: February 20, 2026

**ONLY ELECTRONIC APPLICATIONS
WILL BE ACCEPTED**

**Application documents can be emailed to Shannon Godwin
Shannon.Godwin@nhcnc.net**



Nonprofit Agency:
Physical Address:
Mailing Address:
Location(s) where services will be provided:
Phone:
Agency website (if applicable):
Organization's Executive Director:
Executive Director's Email:
Primary Contact for Grant:
Contact's Email:
Amount Requested: \$



What is the mission of your organization and how does it relate to Northampton County? Specifically, how does your mission address the Northampton County Comprehensive Plan?

Explain how the programs and services of your agency do at least one of the following. Provide detailed and historical anecdotal information.

- **Complement or enhance a current county service at an affordable cost.**
- **Provide a service through means that are more cost effective than the government.**
- **Fill in gaps that may exist between government services and community needs..**
- **Support the advancement of the county's mission, vision and/or strategic plan.**



What are your program goals and how will you measure your success as your grant funds are applied (please use S.M.A.R.T. goals)?

*A SMART goal is a framework for creating clear, achievable objectives, where S stands for Specific, M for Measurable, A for Achievable, R for Relevant, and T for Time-bound, ensuring goals are focused, trackable, practical, and tied to a deadline.

What are the specific needs that your program is attempting to address? How will your program address the specific needs of the community?



Describe the implementation plan and schedule of activities that will directly support your objectives. Please provide a general timeline and include any marketing, community outreach, or social media efforts that will promote your program.



In detail, please provide information on your plans for the funding from Northampton. How will expenses not supported by the grant be covered? How will the project effort continue after the grant ends?



Please complete to reflect your income and expenses from your Income Statements, if necessary, change or add line descriptions to fit your needs.

If you have another completed revenue/expenditures report, please submit it to ensure that it satisfies that needed information before submitting your completed funding request.

AGENCY REVENUES	Amount Funded 2023-2024 (If agency was in existence during this period)	Amount Funded 2024-2025 (If agency was in existence during this period)	Proposed Funding 2026 - 2027
Northampton County	\$	\$	\$
Government Fees & Grants (Specify Agency)			
A.			
B.			
C.			
D.			
Contributions – Sponsor Fees			
Special Events			
Membership Dues			
Program Service Fees/Revenues			
Sales of Materials			
Investment Income			
Miscellaneous			
Transfers from Restricted/Endowed Funds			
REVENUE TOTAL	\$	\$	\$
AGENCY EXPENDITURES			
Salaries	\$	\$	\$
Employee Benefits			
Payroll Taxes			
Professional Fees:			
Program Related Consultants			
Other Consultants			
Legal Fees			
Accounting Expenses			
Supplies			
Telephone			
Postage/Shipping			
Rent			
Rental/Maintenance of Equipment			



Printing & Publications			
Travel & Transportation			
Conferences/Conventions/Meetings			
Assistance to Individuals (Fees/Awards/Grants)			
Membership Dues			
Interest Expense			
Insurance			
Payments to Affiliated/National Organizations			
Miscellaneous			
TOTAL EXPENSES	\$	\$	\$

Describe the population served by your nonprofit:

How many individuals are/were served by your agency? Individuals should be counted as if they participate in no more than one agency program. Provide additional notes below, if needed.

2023-2024 program year

2024-2025 program year

2026 program year (projected)



What other agencies (if any) provide services similar to your agency? How do you coordinate service delivery with those agencies? A letter of support and signature on grant must be submitted to ensure the avoidance of duplicated services and alignment of agency goals.

Additional Required Documents:

Attach a copy of the agency's IRS tax-exempt letter stating 501c3 non-profit status.

Attach a copy of the agency's most recent financial audit.



Grant Terms Info. Please read carefully and initial on the space provided.

_____ Funds must be used for the designated project described in the grant proposal provided to Northampton County.

_____ Grant funds must be used within 18 months of the initial award.

_____ Grant recipients are required to provide a progress report every six months until the grant is closed out, that includes key information such as project status, proof of proper use of funds, outcomes, and success stories. If no funds have been spent by that time, please indicate when funds will be spent.

_____ Failure to provide this interim report will result in automatic disqualification for your organization to apply for Northampton County Economic Development's grant the following year. NCED will send a report reminder email; however, the grant recipient is ultimately responsible for meeting the deadline.

_____ Grant recipients are required to publicize their received grants throughout the community. Pictures and other news can be shared with the Department of Economic Development and other organizations, as appropriate and with proper consent.

_____ Please note that all grants are awarded on the strength of your organization's application. There is no guarantee that the application will be approved, nor is there a guarantee the full funding request will be approved.

_____ I acknowledge that my application must be submitted via email to Shannon.Godwin@nhcnc.net in order to be considered for grant funding.

